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ABSTRACT

This workbook was written for older Americans considering various living arrangements as they get older. It is designed to encourage older adults to take an active role in making decisions about their housing arrangements. An introductory checklist helps readers assess what aspects of housing are most important to them. Other sections explore ways to help older adults stay in their own home, change their home to make it more suited to their needs, or use supportive housing. Questions listed at the end of each section help readers get all the facts before they make a decision. Readers are encouraged to plan ahead rather than make a housing decision in response to a crisis, thoroughly research any prospective change, refer to the Resources section of this workbook to find additional information about various housing alternatives, evaluate their finances, and discuss the options with their family. For older adults opting to stay in their own homes, a variety of in-home services are described, including home health care, homemaking services, nutrition programs, reassurance programs and friendly visiting programs, and home maintenance and repair services. Home adaptations are also discussed. Housesharing, accessory apartments, and ECHO (Elder Cottage Housing Opportunity) housing are explained as possible alternative housing arrangements. The section on supportive housing discusses board and care homes, congregate housing, continuing care retirement communities, and nursing homes. Additional resources are listed and addresses for Offices on Aging are given for all 50 states, the District of Columbia, American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Trust Territory of the Pacific, and the Virgin Islands. (NB)

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A WORKBOOK FOR OLDER PEOPLE AND THEIR FAMILIES

AMERICAN ASSOCIATION OF RETIRED PERSONS

IN COOPERATION WITH THE FEDERAL TRADE COMMISSION

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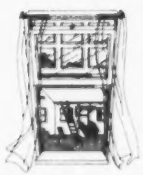

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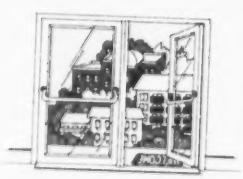

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INTRODUCTION

Like most older Americans, you probably live on your own. In fact, many of you have probably lived in the same home and neighborhood for a number of years.

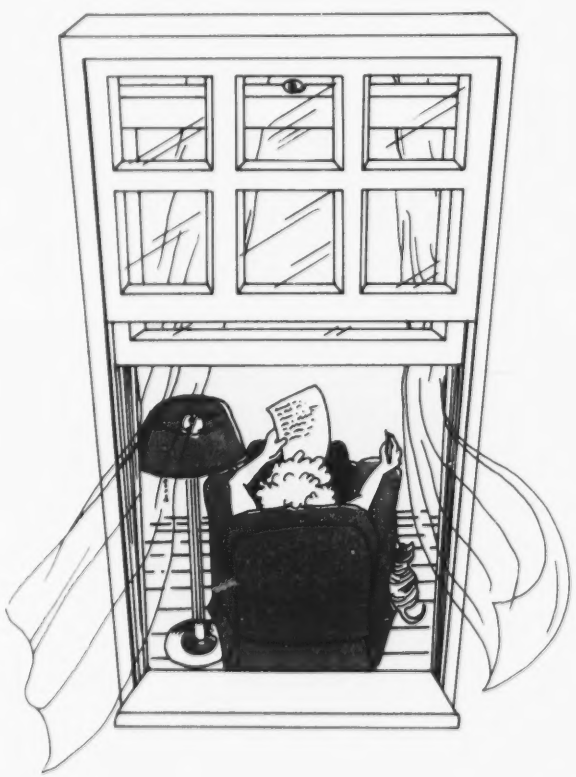
The day may come, however, when your circumstances change and you need to alter your living arrangements. You may decide that your house is too large and that you no longer want to be burdened with constant maintenance and costly utility bills. You may find that common household tasks, like shopping or cleaning, are too taxing. Or, if your health begins to fail, you may need regular nursing attention.

The American Association of Retired Persons (AARP) and the Federal Trade Commission (FTC) have prepared this workbook for those of you who want to consider a variety of living arrangements as you get older. Included here are options that are as simple as having someone come to your home occasionally to clean or cook, or as major as physically moving into a housing facility that offers cleaning and cooking services.

This workbook is designed to encourage you to take an active role in making decisions about your housing arrangement. To help you do that, the workbook offers an introductory checklist to help you assess what aspects of housing are most important to you. It also includes sections that explore ways to help you stay in your home, change your home to make it more suited to your needs, or use supportive housing. Questions listed at the end of each section are designed to help you get all the facts before you make a decision.

Before you choose any new living arrangement, keep in mind the following:

- Plan ahead. Too often, housing decisions are made in response to a crisis. You will have the opportunity to make a wiser decision if you are not under time constraints.
- Thoroughly research any prospective change. For example, before you hire a nurse or an aide to come into your home, carefully check references. Before



you move into a home for older persons, visit and talk with its residents. Look beyond the name to learn what services the facility actually provides. "Retirement communities," for example, may differ widely in the services each offers.

- Refer to the Resources section at the end of this workbook for additional information about these alternatives. While there is no single list of all services across the country, the Resources section and other suggestions appearing throughout provide a good start.
- Evaluate your finances. Not surprisingly, you will find that the more services you require, the more it will cost. This manual is arranged so that, generally speaking, the alternatives listed near the beginning are less expensive than those listed near the end. The cost differences exist because the level of care and expertise differs substantially between occasional household help and full-time skilled nursing care. Remember that you may be reimbursed for some of your expenses through Medicare, private health insurance, or other sources. Prices for most services are not included in this workbook because they vary so much from agency to agency and from one part of the country to another.
- Discuss the options with your family. A new housing arrangement should be made with the participation and understanding of your family or close friends. Together, try to determine your present needs and try to anticipate what your needs may be in the future. Consider health, finances, comfort, and how much you value your independence and privacy. The housing choice you make is one you may live with for a long time. The decision to change your living arrangement may be a significant event in the life of your entire family.

INTRODUCTORY CHECKLISTS

Take a moment to review these lists. They may help you make a more informed housing decision.

HOUSING CONSIDERATIONS:

What is Important to You?

	Very Important	*Moderately Important*	*Not Very Important*
1. Staying in your present home.	☐	☐	☐
2. Living near your friends.	☐	☐	☐
3. Living near your family.	☐	☐	☐
4. Living near your place of worship.	☐	☐	☐
5. Access to public transportation, stores, and community services.	☐	☐	☐
6. Having home maintenance services available.	☐	☐	☐
7. Privacy.	☐	☐	☐
8. Keeping housing costs to a minimum.	☐	☐	☐
9. Having in-home companionship.	☐	☐	☐
10. Keeping your pets, your own furnishings, and other personal items.	☐	☐	☐
11. Feeling secure in your home and neighborhood.	☐	☐	☐
12. Living in a home-like environment.	☐	☐	☐
13. Having numerous activities available to you.	☐	☐	☐
14. Having a large amount of living space.	☐	☐	☐
15. Knowing that health care services are readily available.	☐	☐	☐

ASSISTANCE:

Do You Need or Anticipate Needing Assistance with the Following?

	Now	*Within 1 Year*	*Within 3 Years*
1. Preparing meals.	☐	☐	☐
2. Transportation.	☐	☐	☐
3. Light housekeeping.	☐	☐	☐
4. Medical care.	☐	☐	☐
5. Bathing and personal care.	☐	☐	☐
6. Home maintenance.	☐	☐	☐
7. Getting around the house.	☐	☐	☐
8. Overcoming loneliness or isolation.	☐	☐	☐

FINANCIAL CONSIDERATIONS

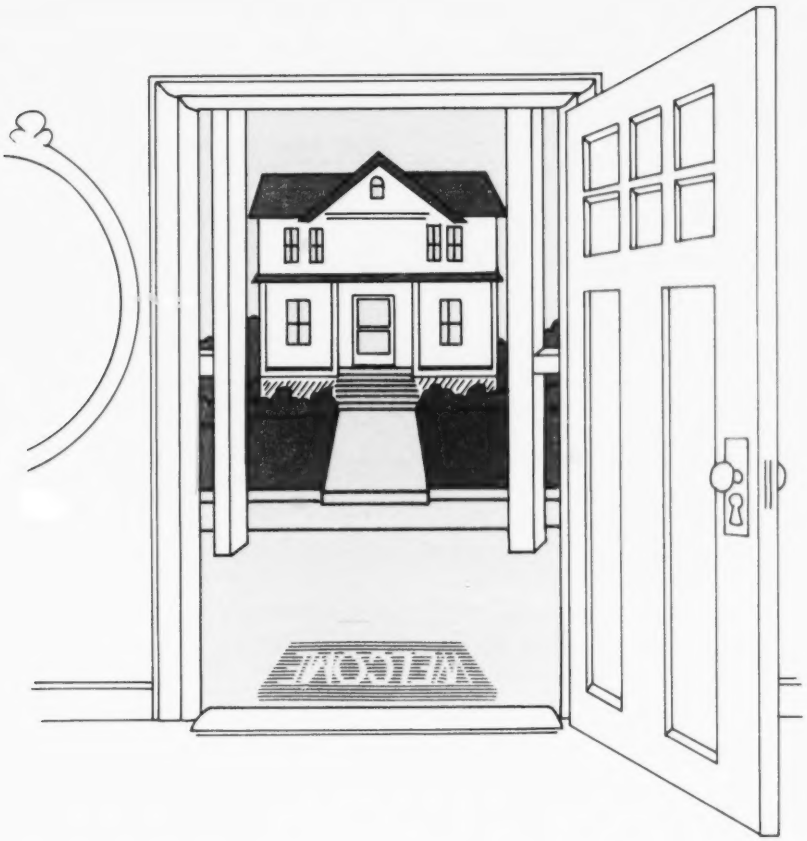
1. What percent of your income do you currently spend on housing? (A general rule of thumb is that approximately 30% of one's gross income can be spent on housing, including utilities.)_____
2. Is the amount you presently spend on housing minimal, adequate, or comfortable?_____
3. What is your anticipated budget for housing over the next 5 years?_____
4. Do you expect your income to increase or decrease over the next 5 years?_____
5. Would you consider changing your housing arrangement to adjust to any change in income?_____
6. Would an arrangement that brought in rental income from an accessory apartment or a housesharer be worth the modification costs?_____
7. Would the financial benefits of living with others be worth adapting to a new living arrangement?_____
8. Would you be eligible for an arrangement that offers subsidized rents? (Income limitations vary across the country, so check with your local housing authority.)_____
9. If you need minimal health care services under a physician's care, have you considered the cost difference between home health care and moving into a nursing home?_____
10. What is the possibility of receiving Medicare, Medicaid, or private insurance reimbursement for any of the health care services that you need?_____

DECISIONMAKING

Keep the following questions in mind as you read through this workbook. When you have finished, you may want to refer back to this section for help in your decisionmaking.

- What could force you to give up your present home?
- What would allow you to stay in your present home?

	Yes	*No*
1. Have you carefully reviewed all the options available to you?	☐	☐
2. Have you learned enough about the available providers in your community?	☐	☐
3. Have you talked to other older consumers about their experiences?	☐	☐
4. Have you discussed the options with members of your family? With friends?	☐	☐
5. Are you confident that the provider you have selected offers services that will meet your needs?	☐	☐
6. Have you determined the prospective costs and benefits of each housing option?	☐	☐
7. Is there a waiting period for the housing service you want and, if so, when should you put your name on the waiting list?	☐	☐



STAYING IN YOUR HOME

Like most people, you probably prefer living in a familiar home and neighborhood. But you may also find that regular or even occasional help can make your life easier and more enjoyable. For example, if you need assistance with housework, personal care, nursing, or cooking, you can hire someone to come into your home to help you. If one spouse needs regular attention, in-home care may make it easier for you and your spouse to continue living together. In addition, in-home care may be a less costly alternative than institutional living.

There are a number of sources of information about in-home services. First, check with your local or state office on aging. Refer to the addresses listed in the Resources section at the end of this manual. Your local government may operate a variety of programs and services. Offices on aging, in particular, frequently have information and referral services. Non-profit organizations such as churches, synagogues, and senior centers, may be able to help you locate services or may provide services themselves. Look in the Yellow Pages of your telephone directory under "nurses," "nursing services," "home health services," or "social service organizations." Also, check your local public library.

Once you narrow your choices, check the reputation of the agencies providing the service. Ask friends who have used the service. If the service is health-related, call your personal physician. Contact your local Better Business Bureau and local consumer protection office to ask about the reputation of the organization or agency which interests you. This extra work at the outset may save you trouble later on.

HOME HEALTH CARE

If you need medical care, but do not require intensive care, life support systems, or any complicated treatment, you may be able to arrange for home health care. It is one of the oldest home care services in existence and is rapidly increasing in availability and popularity. Many home health agencies also provide homemaker services, which are discussed on page 9 of this workbook.

Home health care generally involves regular home visits by a registered nurse, a licensed practical nurse, a vocational nurse, a nursing assistant, a home health aide, a therapist (occupational or physical), or a nutritionist. This type of care is usually provided only with the recommendation of a doctor, often through the social service department of a hospital. These experts will help you determine the kind and amount of care you need. Check with your doctor every several months; if your needs change, so may the amount of care you require.

Fees charged by home health agencies vary with the agency and the services provided. Services provided by therapists or nutritionists usually are the most expensive. The scale slides downward for registered nurses and even farther downward for home health aides. The cost for the services of a nutritionist is usually somewhat less; even less expensive is a nursing assistant.

You may also be eligible for reimbursement for some of the costs of home health care. If your home health care has been ordered by a physician, Medicare will partially reimburse you for part-time skilled nursing care; physical, speech, and occupational therapy; part-time home health care; and some medical supplies and equipment. These services, however, must be provided by a home health agency that has been certified by the U.S. Department of Health and Human Services. Medicare is not likely to reimburse you for long-term home care for chronic conditions.

If you are eligible for Medicaid, check with the social service department or the public assistance office in your state. Thirty-eight states now offer Medicaid recipients benefits for home and community-based services.

In addition, private health insurance policies may offer some coverage and benefits for home health care. Health maintenance organizations (HMOs) may cover some types of home health care. Depending on the circumstances, the Veterans Administration provides home health care benefits for military service-connected illnesses and disabilities. In some situations, you may be able to deduct expenses for home nursing services and special health-related equipment from your income tax. (For more information, refer to IRS Publication 502, "Medical and Dental Expenses.")

An estimated 8,000 agencies provide some form of home care. Check to be sure that the agency you are considering is in compliance with state requirements for certification. In order to be eligible for Medicare and Medicaid payment, agencies must meet certain basic standards for patient care and financial management. In addition, you may want to check to see if the agency you select is accredited. The National League for Nursing and the American Public Health Association jointly accredit visiting nurse associations and home health care agencies. The National HomeCaring Council accredits programs that provide homemaker-home health aide services. (The addresses of these associations are listed in the Resources section.)

Frequently, families will hire a home health assistant on their own, without going through an agency. If you do this, make sure that you check all references and credentials. Formalize your basic employment agreement in writing and make sure both you and your employee sign it. As an employer, you may be responsible for withholding state and federal payroll taxes, social security, unemployment insurance, and workers' compensation insurance. Contact your local social security office or state labor department for specifics.

HOMEMAKING SERVICES

Homemaking services are designed to help you with light housekeeping, laundry, food shopping, personal care, and meal preparation. Unlike home health care, they do not include any nursing or health care services. In some situations, a homemaker may be able to help with correspondence and other personal business. Obviously, the extent of service provided, whether it is daily or weekly, depends on your needs. Fees vary accordingly.

Homemaking services can be arranged through an agency or on an individual basis through newspaper advertising or word of mouth. Always check references before you hire anyone to come into your home. As a reminder, contact your local social security office or state labor department for specific information about your responsibilities as an employer. In addition, if you are working with an agency, ask if the agency is accredited by the National HomeCaring Council. (The address is listed in the Resources section).

NUTRITION PROGRAMS

If you have difficulty preparing your own meals or do not have transportation to a grocery store, find out if your community has a "meals on wheels" program. Once a day, volunteers will deliver nutritious hot lunches and cold food for the evening meal to your home.

Sometimes, meal programs will offer meals for diabetics and those with other special needs. Meals generally cost from $5 to $18 a week. Meals on wheels programs are usually listed in the White Pages of the telephone directory.

If you want to share mealtime with other people and are able to travel out of your home, check with local senior centers, churches, synagogues, and schools. These organizations often serve hot meals at regular times during the week. A nominal contribution may be requested for each meal. In some jurisdictions, community buses provide transportation to and from nutrition centers, making it easier for people to take advantage of this service.

REASSURANCE PROGRAMS AND FRIENDLY VISITING

Sometimes you just may need someone to talk to or to reassure you that you are not alone in case of an emergency. If you do not have relatives or friends nearby, you may want to look into reassurance and friendly visiting programs. You can often find them through the sponsoring agency—neighborhood groups, local churches and synagogues, and other local social service organizations. Volunteers will call or visit on occasions when you want companionship or on a regular basis simply to see that things are in order. This kind of contact will provide you with someone to talk to, to read to you, or to help you with your correspondence. This service may better enable you to continue living alone in your home.

HOME MAINTENANCE AND REPAIR

Your community may provide a home maintenance and repair program or chore service for older homeowners. These programs are often administered by local neighborhood improvement or social service agencies. For a nominal annual fee (often in the area of $10), someone will come to your home once a year. This person will do repair work and be available to assist you whenever there is an emergency, such as a frozen pipe or a broken window. Others provide free labor for repairs, but the homeowner may be asked to furnish the necessary materials. The repair work is often provided by retired plumbers, electricians, and carpenters.

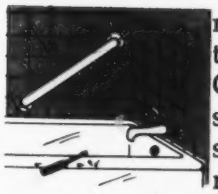
Most services that are necessary to keep a home safe and livable are usually covered by the program. Major improvements or additions to the home are not included, but the program will often help locate a contractor.

Some jurisdictions have low-interest or no-interest loans for home repair. Generally, these loans do not have to be repaid until a homeowner sells or leaves the home. Check with your local office on aging or community development to see if these loans are available in your community.

Home maintenance can also be arranged informally as a service exchange. For example, you may find someone willing to do yard work or light housekeeping for you in exchange for babysitting. The bulletin board of your local church, synagogue, or senior center might be a good place to announce your interest in this kind of exchange.

HOME ADAPTATIONS

Sometimes you can make small changes in your home that will increase your ability to



move around and do routine household activities. Grab bars and handrails, seats in the bathtub or shower, and lever handles rather than hard-to-grip round door knobs may make your home more suited to your needs. Even expensive changes, such as enlarging doorways to allow wheelchair access or installing a shower that can accommodate a wheelchair, can sometimes be more economical than moving.

Some communities have programs that provide a specialist to analyze your needs and recommend home improvements. Some may even install small items free of charge.

For extensive home modifications, you probably will need to hire a contractor who does remodeling. You should comparison shop by getting several layout designs and cost estimates from contractors. Before you sign a contract, check the bidder's credentials with your local consumer affairs office or Better Business Bureau.

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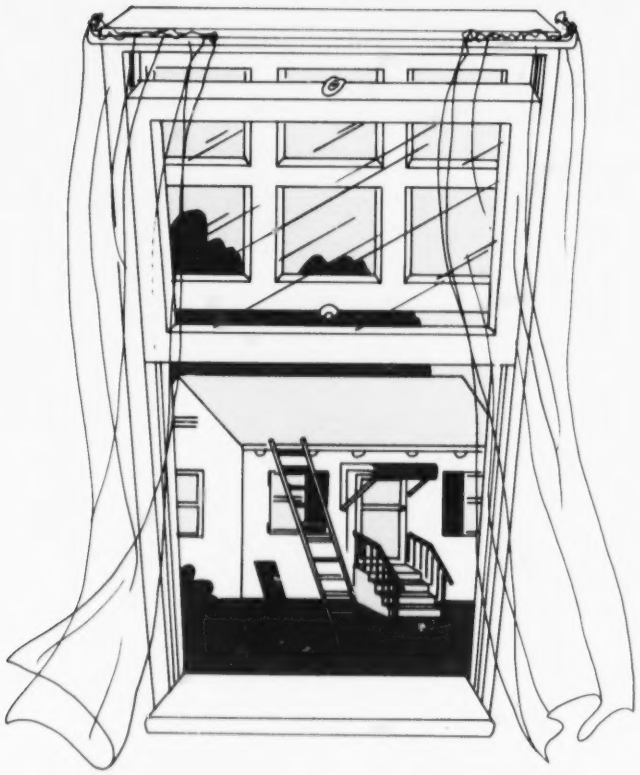
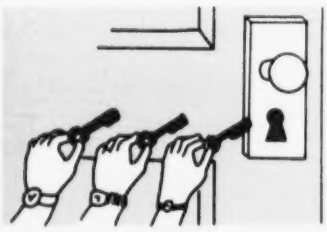
1. How could you adapt your living arrangement so that it is more suited to your needs?
2. What particular services do you need?
3. Who provides these services?
4. Are the service providers licensed, bonded, or sponsored by a responsible agency?
5. Have you met the staff members of the agency you are considering? Do you anticipate any problems in getting along with them?
6. How often do or will you need the service?
7. Can the schedule be arranged to fit your needs?
8. How can you arrange for emergency service?
9. What are the financial arrangements? Are payments expected on a weekly, monthly, or quarterly basis?
10. If the service is home health care, is the provider certified for reimbursement by Medicaid or Medicare?
11. Are Veterans Administration (VA) benefits available to you to help cover the costs of home care services?
12. Does your private insurance plan include any coverage for home care services?
13. Are low-interest or deferred payment loans available in your community for home repair?
14. Is there a waiting period for home repair service?



CHANGING YOUR HOUSING ARRANGEMENTS

You may find you want or need to change your housing arrangements so that you are around other people on a regular basis. If so, you may want to explore some of the following alternatives.

HOUSESHARING



You might consider sharing your home with others. This increasingly popular option called "housesharing" or shared housing involves two or more usually unrelated people living together in a house or large apartment. Each person is likely to have his or her own bedroom, and share a general living area, kitchen, and, sometimes, a bathroom. Generally, structural changes do not have to be made to a residence to accommodate the arrangement.

If you are used to living alone or with family, the idea of sharing a home with one or more people unrelated to you may seem strange. But this arrangement has economical and social advantages and is really not new to American life. It used to be called "taking in a boarder." If you share your housing and utility costs with other people, you are likely to spend less money than if you continued to live alone. And, with others around, you will have someone to talk to and someone to help with household tasks.

You can set up a housesharing arrangement by renting extra bedrooms in your own home. This will increase your monthly income, providing you with additional financial resources. (This income, of course, is taxable.) Or, you might join a group

residence already set up in another house. You may decide to start a group yourself and find a house that will accommodate several others. However, be sure to check zoning laws to insure that this is permissible in your neighborhood.

The dynamics of housesharing arrangements depend, of course, on the people involved. Before you agree to live with others, you need to discuss and clearly define the responsibilities and expectations of each individual, especially about such matters as finances and household chores. For example, who will regularly pay the rent and utility bills? Who will prepare the meals, wash the dishes, or clean the living room? In addition, you must think about compatibility of living habits and such issues as whether or not pets will be permitted. It is advisable, no matter how informal or friendly the arrangement, to sign a formal lease.

Another way of arranging shared housing is through an exchange of services for rent. For example, a homebound homeowner might prefer having a housesharer do housework, grocery shopping, yard work, or other errands in exchange for a place to live. Variations of this kind of arrangement can be worked out on an individual basis.

There are many ways to find people who want to share a home: word of mouth, newspaper ads, community bulletin boards, and, in some communities, house-matching services. Match programs try to bring compatible homeowners and homeseekers together by providing a central location for these persons to share their needs. Counselors interview both parties to learn what types of house, location, and circumstances are desired or available and what kind of person each would care to live with. This may help create a more successful housesharing arrangement.

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1. What is essential to you in a housesharing arrangement?
2. How will your situation be improved through a housesharing arrangement?
3. Will zoning laws in your neighborhood permit two or more unrelated people to share a home?
4. Would it be better for you to share your home or to become a homesharer in another house?
5. Will your need for privacy be met?
6. Have you looked into what will be expected of you in a housesharing arrangement in terms of chores, provision of furniture, and financial responsibilities?
7. Do you have unusual requirements that will make it difficult for others to live with you?
8. Can you be tolerant of the eccentricities of others?
9. How do others who know you (family and friends) think you would get along in shared housing?
10. How will your financial and tax situation be changed?
11. Will the income you receive from sharing your house have any effect on Supplementary Security Income (SSI) or food stamp benefits? (Check with your local social security or welfare office.)
12. Are you willing to sign a formal agreement with the homeowner (or homesharer) that defines rent payments, utility payments, maintenance and other obligations, and property to be shared?

ACCESSORY APARTMENTS

You may decide that by making some changes in your house you could create a separate self-contained apartment unit. This is called an accessory apartment, and it allows you to live independently without living alone.

An accessory apartment, where feasible, has other advantages. If you own your home, you can rent out the apartment to help pay for your living expenses. If you rent an accessory apartment from a relative or neighbor, you can live near people you know and, in some cases, continue to live in a familiar neighborhood. You may find an opportunity in any of these situations to exchange services, such as light housekeeping or babysitting, for reduced rent.

Of course, the layout of the original house determines the ease with which you can create an accessory apartment. Providing a kitchen, bath, and access to the unit are usually the most complicated and expensive considerations. It is economical, for example, to design the new kitchen and bathroom around existing plumbing hookups, if feasible. The kitchen, in particular, must be properly installed for safety, and building codes must be adhered to when changes are made. You may also want to think about making the unit barrier-free, should the need for a wheelchair or other orthopedic appliances arise.

The entrance to the accessory apartment generally would be separate from the entrance to the main dwelling, often through a walkout basement or back door. Zoning codes may require that the entrance door to the apartment not change the appearance of the front of the house. If so, you will have to plan an entrance on the side or in the back of the house.

Check with your local zoning commission to determine what regulations prevail in your community concerning accessory apartments. Neighborhoods zoned for single-family homes may prohibit accessory apartments. Restrictive convenants may also inhibit their use. However, many communities are beginning to review their zoning laws to make the changes necessary to allow accessory apartments. Frequently, special-use permits are required. Some local ordinances require that the residents of both units be related.

Before you begin any renovation, get several estimates from building contractors or architects. Check each one's reputation with your local Better Business Bureau or consumer affairs office.

If you renovate your own home to create an accessory apartment, consider whether you want to perform such tasks as handling leases and security deposits, selecting tenants, and getting credit references. Determine whether the rent and companionship will be worth the costs of renovation, increased utilities, taxes, and insurance. Since the rent you receive may be considered taxable income, check with your local social service agency to see if this will reduce any government aid you receive, such as Supplemental Security Income (SSI) or food stamps.

If you rent an accessory apartment from someone else, make sure all necessary provisions, such as security deposits, insurance coverage, rental costs and increases, and provisions for terminating the lease, are in writing. Even if you rent your unit to or from a relative, you will want to discuss—and probably put into writing—traditional landlord-tenant issues, such as who is responsible for paying utilities, maintenance, and repairs.

1. Have you determined whether second units are permissible under existing zoning laws?
2. Does your house lend itself to conversion to an accessory apartment? Will building a separate entrance, second bathroom and/or kitchen be a sound investment?
3. Will the benefits you receive from renting the accessory unit compensate you for the costs of conversion?
4. Will adding an accessory apartment enable you to live with the independence, privacy, and security that you want?
5. Is there an agency or an organization in your community that is involved with the development of accessory apartments?
6. Do you want to work out an arrangement of service exchange with the residents of the other unit?
7. Is there adequate parking available for both households?
8. Have you determined how utility payments will be shared?

ECHO HOUSING

Another alternative you might want to consider is ECHO housing. ECHO stands for Elder Cottage Housing Opportunity. These homes are small, self-contained, portable units that can be placed in the back or side yard of a single-family house. The idea originates with the Australian "granny flats" which are portable units manufactured to enable parents to remain near their adult children and families. You might consider this alternative if you want to live near family and friends but retain the privacy of living in your own detached dwelling.

There are other advantages to ECHO housing units. They are economical. For example, companies in California and Pennsylvania offer completely installed one bedroom units with more than 500 square feet for less than $20,000. ECHO units have also been designed to accommodate two bedrooms. Units are usually barrier-free and energy-efficient. They can be aesthetically compatible with the existing single-family dwelling by adding similar siding, window details, and roofing material. In addition, these housing units are portable. This is important since their placement is generally based on a special-use permit which is likely to have a termination date.

Of course, the size of the unit you purchase will depend on the amount of space you want to live in and the size of the existing house and lot. The location will depend on utility connections, zoning restrictions, and architectural considerations.

Many people mistakenly equate ECHO housing with mobile manufactured housing which is restricted in a number of communities by zoning laws. Unlike mobile homes, ECHO housing is specifically designed for older or disabled persons. As with accessory apartments, local governments are beginning to review zoning laws and recognize the merits of ECHO housing.

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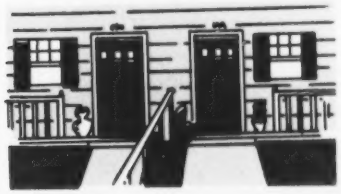
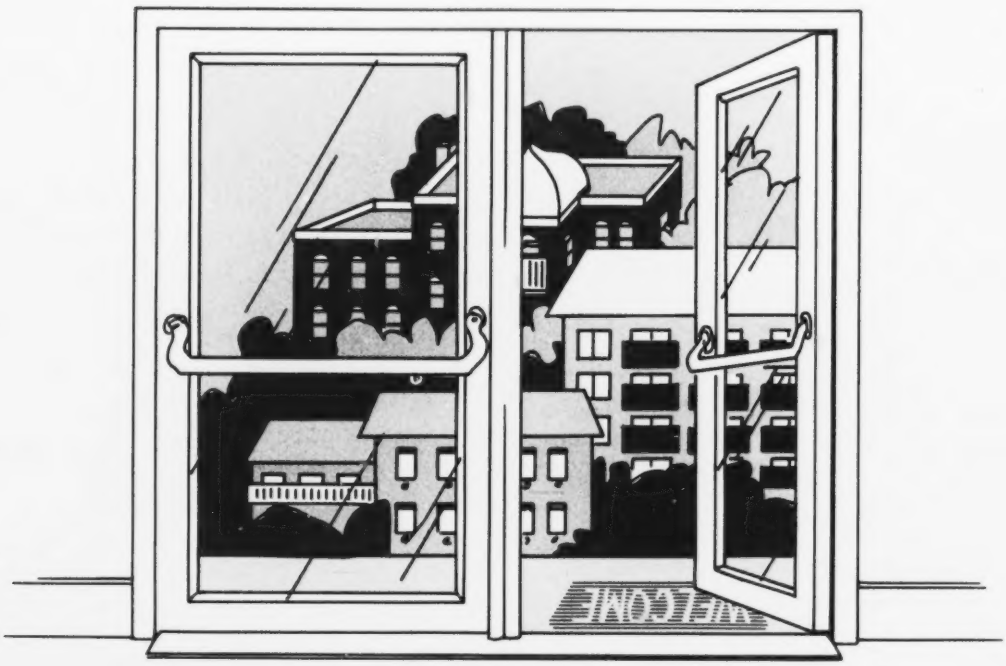
1. Will zoning in the neighborhood permit ECHO units? Do you need to apply for a special-use permit?
2. Is the property suitable for an ECHO unit, leaving adequate usable yard space for both structures? Is there sufficient parking? Will you have to do any landscaping once the ECHO unit is in place?
3. Can you meet the financial obligations of an ECHO unit? Might you work out an arrangement of service exchange with your new neighbors?
4. Have you looked into the matter of utility hook-ups for the ECHO unit?
5. Have you looked into the tax treatment of an ECHO unit by your community?
6. Will adding or moving into an ECHO unit provide you with the amount of independence and privacy you need? Do you have a relative or friend who would live in the other unit on the property?
7. Is there an agency or an organization in your community that is involved with ECHO housing?

OTHER OPTIONS



You also may want to look into some of the shared living alternatives listed below. Remember to check with your local zoning board for any restrictions.

- *Boarding Homes/Rooming Houses.* These accommodations may include a bedroom and a sitting room with a shared or private bathroom. Tenants usually eat together.
- *Single Room Occupancy.* These accommodations, with widely-varying facilities, are frequently found in converted hotels, schools, and factories. Rooms are rented at a specified price according to a short-term, renewable lease.
- *Professional Companionship Arrangements.* You could offer your services as a companion to someone who wants the help and company of another person in exchange for living accommodations.
- *Caretaker Arrangements.* If you like caring for a home, doing gardening, or babysitting, you may reduce your costs for room and board by performing these tasks for a family with an extra bedroom or apartment in their home.
- *Commercial Rentals.* These rooms are usually leased for longer periods of time than single room occupancies. They often are found in apartments, houses, or in auxiliary buildings of large single-family homes.



SUPPORTIVE HOUSING

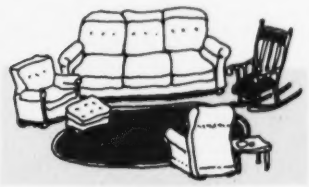
One day you may realize that living alone in your own home is becoming too difficult. Perhaps your health is beginning to fail or daily chores are becoming unmanageable. You may find yourself facing some serious housing decisions.

The following chapters are for those of you who want to learn about "supportive housing arrangements." This is not just a fancy name for nursing homes. Supportive housing refers to a variety of housing arrangements, from boarding homes to skilled nursing facilities. Each can provide you with different degrees of daily care. For example, you can choose among:

- *Board and Care Homes*. If you want to maintain as much independence as possible, but need help with food preparation and personal care, a board and care home may be the answer.
- *Congregate Housing*. This may be an attractive alternative if you are interested in living in a group situation where meals are shared, heavy housekeeping is provided, and staff is available to organize a variety of social and recreational activities.
- *Continuing Care Retirement Communities*. This option allows you to lead an independent lifestyle in a community with a full range of services and activities, including health care services. A contract, signed upon entering the community, will specify, among other things, the amount of nursing care that is covered.
- *Nursing Homes*. This alternative provides 24-hour medical care if you are frail and need nursing care services or have a disabling chronic condition.

Why would you choose one of these alternatives? Whether or not you are capable of living on your own, a supportive housing environment can relieve you of the daily tedium of cooking and home maintenance chores. If there are health considerations, you may decide that having access to medical facilities is a wise choice. Or, if you do not have family and friends nearby, a supportive housing arrangement allows you to share activities with people your own age and establish "roots" in a community that will cater to your particular needs as an older American.

BOARD AND CARE HOMES



If you need help primarily with daily home chores, you may want to investigate board and care homes. This rental housing arrangement enables you to come and go as you please, but provides regular housekeeping services. If you are interested, it offers the opportunity to build a family-style living arrangement with others in the home, often sharing meals and other activities.

The services provided by board and care homes, also called "sheltered housing" or "residential care facilities," vary widely. Basic rent generally includes room, board, utilities, housekeeping and laundry, and regular contact with staff members to insure that "all is well." This sense of responsibility for the overall well-being of the residents distinguishes board and care homes from the more familiar boarding homes.

Some board and care homes offer more extensive services. For an additional fee, you may receive assistance with personal care, such as bathing or grooming. Some board and care homes provide for the social, recreational, and spiritual needs of the residents. Many try to create a home-like atmosphere by remaining small and friendly.

Some states and localities require board and care homes to be licensed. Others are considering licensing requirements. This helps insure that fire, safety, health, and other relevant minimum standards are met and that homes are not allowed to fall into disrepair. Try to learn whether the home you are considering complies with any licensing requirements which may exist.

It is important to visit a home before you decide to move in. Look at the private room you may occupy. Ask about the services provided. For example, learn where or how laundry and heavy chores are done and how charges are determined. Find out if you can arrange a flexible package of services to fit your needs.

The quality of service provided in board and care homes will vary. Talk to other residents about their experiences. If you are accustomed to certain standards of cleanliness or have other requirements, select a board and care home that satisfies your needs. Before entering into a contract, make your own assessment of services offered so that your expectations will be met. Most important, make sure that all the arranged services and fee provisions are specified in the contract you sign with the facility.

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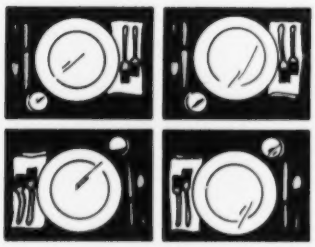
1. Will living in a board and care home provide you with the independence, privacy, and security that you want?
2. What services does the board and care home provide, in addition to room, meals, and laundry? Are there additional charges for these services? How often is housekeeping and laundry done? Does laundry service mean personal laundry as well as a linen service?
3. Is the home accessible to public transportation, your place of worship, and shopping?
4. Will the board and care home be able to meet your special dietary needs? Is it possible for you to prepare meals and/or snacks on your own?
5. Can you use your own furnishings? Is there a living room, TV room, or room for social activities? Are pets permitted? Is there just one telephone or can you have a telephone in your room?
6. Do you have to share a bathroom?
7. Is there a common area or extra bedroom for guests?
8. Are there locks on the individual rooms?
9. Is it possible to avoid climbing stairs, if you have difficulty with stairs?
10. Is the home in compliance with state and local standards for fire safety and health?
11. To what extent does management assume responsibility for the security of your personal belongings?

CONGREGATE HOUSING



If you would benefit by sharing daily activities with others on a regular basis, you might investigate congregate housing. While you have your own private living quarters, including a kitchen for light meals and snacks, you routinely eat with others in a central dining facility. Congregate housing is an updated version of the old resort hotel that served meals in a central dining room and provided housekeeping services.

Congregate housing is distinguished from board and care homes by the presence of professional staff, such as social workers, counselors, or nutritionists, who help administer services and social activities. For example, the home may provide housekeeping services, transportation to shopping areas, movies, speakers, and entertainment. If you are infirm or have trouble getting around, this type of arrangement relieves you of major cooking, housekeeping, and shopping responsibilities. In some congregate homes, residents organize advisory councils to work with the staff on policies and home management.

The monthly rate for a unit in a congregate arrangement varies greatly. Often the rates are affected by a federal subsidy to help cover a percentage of the rental fees. Today most congregate housing facilities are sponsored by non-profit organizations or government agencies and may range in size from 35 to 300 units.

If you explore a congregate housing arrangement, visit the facility and talk to some of the residents before signing a contract. The environment, management, and staff of the facility probably will affect your feelings about living there. Learn what services are available. For example, find out how many meals are provided during the week and whether you can prepare food in your own unit, if you wish. Ask if there is a selection of entrees at meals and if the facility accommodates special dietary needs. Find out if tray service is available if you cannot get to the central dining room for a particular meal. Ask if there is a flat rate for all the services or whether you can pay for only those you use. In addition, determine what kinds of social activities are offered and if there is public or private transportation to and from activities you might enjoy.

It is not only the services—such as nutritional programs—that make congregate housing appealing. Without requiring you to give up your privacy and independence, congregate housing provides a source of companionship and group involvement. In addition, the facility makes an effort to monitor your health and well-being. You may have an increased sense of security knowing that assistance is available should you need it.

1. What services does the congregate facility have in addition to meals and housekeeping? Does it have transportation? Social activities? A library? Physical, occupational, or speech therapy? Counseling? Daily telephone monitoring? Recreational activities? Are there additional costs for any of these services?
2. Will living in a congregate facility provide you with sufficient privacy?
3. Will you enjoy sharing meals with other residents?
4. Will you appreciate the security that comes with knowing that assistance is available in an emergency?
5. Did you feel comfortable with the general atmosphere of the home during your visit?
6. Will the kitchen be able to prepare food to meet your special dietary needs, such as vegetarian, kosher, and low-sodium meals? Is there a selection of entrees at each meal?
7. Can you bring your own furnishings? Are draperies and carpets provided by the facility?
8. Are there individual phones in each room, or on each floor or wing?
9. Are there restrictions on having visitors? Are there overnight accommodations, either in the facility or close by for out-of-town guests?
10. To what extent does the management assume responsibility for the security of your personal belongings?

CONTINUING CARE COMMUNITIES

Have you thought about an independent living arrangement that includes affiliated nursing facilities? You may want to look into a continuing care retirement community. For an older person, a continuing care facility can be a practical solution to the problem of assuring independent but supportive living as long as possible, and yet guaranteeing that 24-hour nursing care is available when necessary. In some parts of the country, continuing care may also be called life care.

In addition to providing living units, meals, and health care, continuing care communities typically have a large variety of services and activities. For example, some communities include recreational facilities such as swimming and golf. Most include some form of recreational rooms and organized social activities. Many have religious services, a library, classes, physical therapy, and gardening opportunities.

Continuing care communities are usually more expensive than board and care homes and congregate housing. They generally require a substantial entrance fee as well as monthly charges. The entrance fee may range from $20,000 to $100,000. Monthly fees may range from $650 to $1,200 and may increase over time. More than boarding homes or congregate housing, continuing care communities represent a lifetime commitment.

In exchange for the fees, you are assured of housing and services for the rest of your life, regardless of your health. Some continuing care facilities offer full health care benefits at no additional charge. Some facilities offer full care, with additional costs after a certain number of days of health care per year. Still others charge fees for certain specific medical services. In your investigation of various communities, try to determine whether any portion of the medical fee is tax deductible. Some "retirement communities" have all the amenities of a continuing care community, but offer health care on a pay-as-you-go basis. Such programs may be more suited to your financial circumstances, especially if you do not want to sign a long-term contract.

Continuing care communities vary in size from about 100 to 500 living units. They serve both individuals and couples. Couples can remain together in the same community setting even though health needs may require that one spouse be transferred to the health care unit. Should one die, the surviving spouse can be assured of uninterrupted care.

Non-profit housing corporations have been the principal, although not sole, sponsors of continuing care retirement communities. The nursing facility in the community is subject to the same licensing as other health care facilities in the state.

If you are considering a continuing care retirement community, you would be wise to seek professional, legal, or financial advice before entering into the arrangement. If the facility is new, learn all you can about the sponsors and the management. Ask for a financial statement. Learn the nature of all reserve funding and determine whether prepaid fees will be placed in escrow. Ask the management for biographical information about the owners, sponsors, and board of trustees. Check the management's reputation at the Better Business Bureau. If the facility has been in operation for a number of years, talk to the residents, their families, or local consumer groups.

Learn at the outset what the entrance requirements are. These requirements tend to vary, but new residents must generally meet certain health requirements, be ambulatory, have evidence of financial resources necessary to meet expected fees, and fall within minimum or maximum age requirements. You should also be prepared to have your name placed on a waiting list, since these accommodations are often in demand.

Make sure you understand the contract you sign. Look closely at the conditions, if any, under which your entrance fee is refundable. For example, what portion of the fee will be refunded if you decide to leave the community within a few months of your having moved in? If you die, will a portion of your entrance fee be refunded to your estate? If so, how much?

Determine how the monthly charges are established and under what conditions they may be changed. Typically, monthly charges are related to the changes in operating expenses, but fees may also be adjusted to the level of services you enjoy.

The contract should establish the basis on which you may be moved from your own residential living unit to a health care facility. It should also state what is involved in a transfer back to a residential unit. In many cases, these decisions are made jointly by you or your representative, family members, medical advisors, and the manager. In some states (Wisconsin, for example), a resident requiring more than seven hours of nursing care a week over an extended period of time is automatically transferred to a medical unit. Even with state guidelines, such decisions can be difficult to make.

Continuing care communities are still evolving as a major pattern of supportive housing. Some such communities have suffered economic difficulties due to inflation or the inability to anticipate the effects of the extended lives of residents. However, with the introduction of actuarial and financial advisory services, good management and business practices have become more commonplace. It is advisable to thoroughly investigate the financial integrity of any institution you are considering.

A number of states* have passed, or are considering, legislation regulating continuing care communities. Most of the statutes address refund provisions, reserve requirements, and financial disclosures to residents. To learn the extent of regulation within your state, check with your state insurance, health, or social service office.

*At this time, these 12 states have enacted legislation concerning continuing care retirement communities: Arizona, California, Colorado, Florida, Illinois, Indiana, Maryland, Michigan, Minnesota, Missouri, Pennsylvania and Virginia.

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1. What kind of health care facility is located in the community? Does it provide a full range of services, such as annual or routine physical exams; dental care; physical, occupational, and speech therapy; prescription drugs; and/or eyecare?
2. What is the limit to the health and medical care coverage that is included in the regular fees?
3. What is the community's policy for transferring residents from apartments and independent living units to nursing home facilities? What is the policy for returning residents to their apartments or independent living units?
4. What are the entrance requirements and do you meet them?
5. What services are included in the fees? Housekeeping? Linen service? Personal laundry?
6. Are there many social activities such as gardening or bridge? Is there a library? Are there recreational facilities such as walking and hiking trails or a swimming pool?
7. How many meals are included in the contract? Is tray service available, if it is needed? Is the kitchen willing to prepare meals to fit a prescribed diet?
8. Is there a resident association or a resident advisory group which meets with the management?
9. Are there religious services at the facility?
10. Is local transportation included? Telephone service? Is there adequate parking?
11. What is the policy for refunding the entry fee if you should move away from the community?
12. Have you reviewed the community's financial statement with your attorney or accountant? Have reserves been established by the community to protect its residents? Under what circumstances can the reserves be used?
13. What, if any, action will the community take if your personal financial resources are depleted and Medicaid must assume your health care costs?
14. Have you been in touch with the Better Business Bureau or your local consumer affairs office to determine the home's reputation?

NURSING HOMES

If you need extensive and extended health care, you may find that a nursing home best suits your needs. A nursing home provides 24-hour medical care under a physician's direction. Unlike the other kinds of supportive housing discussed here, nursing homes will admit you only by a physician's order.

Nursing homes generally provide two levels of care: intermediate and skilled. If you are unable to live independently but do not need consistent, intensive care, you would receive *intermediate care*. If, however, you need intensive care but do not require hospitalization, *skilled nursing* would ordinarily be prescribed.

Many nursing homes also offer additional services, such as custodial and personal care to help with meals, bathing and grooming, and regular supervision. Some have counseling services, occupational therapy, speech and hearing therapy, religious services, and recreational activities. And some nursing homes, as part of a community service, operate a meals on wheels program, a senior center, or an adult day care center.

All state governments require that nursing homes be licensed. The licensure requirements establish acceptable practices for care and services. For example, nursing homes must provide licensed staff, 24-hour access to a physician, and a certain level of quality of care. State inspectors visit nursing homes at least once a year to determine their compliance with state standards and their qualifications to receive Medicare and Medicaid reimbursement.

Today, more than 19,000 nursing homes provide care to about 5% of America's older population. Most are operated for profit. These are usually among the smaller facilities and may be attractive to you because of their size. On the other hand, non-profit homes, usually affiliated with religious or fraternal groups, or local governments, are often known for the diversity of their specialized services. They tend to be larger and slightly more expensive than for-profit homes.

Medicare and Medicaid, as well as private health insurance companies, reimburse some, but not all, nursing home expenses. Medicaid reimbursement policies change frequently and vary from state to state. To determine if you are eligible for Medicaid and, if so, what nursing home expenses will be reimbursed in your state, ask your state department of social services, welfare, or social security. *The Medicare Handbook*, available at your local social security office, is also a good source of up-to-date information.

Before you select a nursing home, contact your local nursing home ombudsman. The ombudsman program, federally-mandated in 1978, is designed to provide information to the public about nursing homes in a particular area and to resolve complaints on behalf of nursing home residents. The ombudsman should be listed in the local government section of your telephone book. Your physician also may be able to suggest some nursing homes you might consider.

On-site visits to nursing homes will give you and your family an opportunity to talk, not only with the home directors, but also with the staff, residents, and perhaps their families. You can observe the number of nurses and aides available to the residents, the staff's attitude, and the care afforded to patients.

During an interview with the nursing home director, ask what other services the facility provides and at what costs. For example, what provisions are made for non-routine medical care and for dental and eye care? What arrangements does the facility have for regular visits by, for instance, podiatrists, therapists, or even hair dressers? Does the home have pharmacy or other shopping services easily available? When and how many visitors are welcome? Do residents have adequate privacy? Is the management sensitive to the rights and needs of residents? Under what circumstances can the home transfer you to another facility or from room to room?

Staff attitude and housekeeping are especially important elements of nursing home care. Disagreeable odors, torn linens, or poorly maintained equipment are nega-

tive signals you should not ignore. Since many nursing home residents may have little contact with family or friends, some nursing homes establish friendship organizations or "buddy systems" to encourage regular visits by volunteers from the community. Ask if the nursing home you are visiting has such a program. A well-run nursing home should have no objections to inviting the public to visit the building.

Some nursing homes have resident councils that allow residents to participate in governing the home. Ask if there is a resident council and, if so, ask to speak to a representative to hear what kinds of issues are raised at meetings and what the management's reaction is to residents' views.

Discuss your health problems and concerns with the director. Ask if the home can provide you with the kind of care you will need. For example, if you are entering because of a stroke or a broken hip, you may want to ensure that the home has an effective therapy program.

Nursing homes provide a vital service to many older persons. Should you decide that a long-term care facility is best suited for you, shop carefully. As in every other form of supportive housing, being informed will help you make the best decision, particularly if you plan ahead with the help of family and trusted friends.

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1. Has nursing home care been recommended by your doctor?
2. Is professional care available on a 24-hour basis?
3. Have you taken a tour of the entire facility?
4. Have you talked with nurses, other staff members, and the residents? Do they seem professional, warm, and friendly?
5. Do you like the overall atmosphere of the home? Is it clean? Is it relatively quiet?
6. Are a variety of services available, such as social and recreational activities, religious services, or occupational and physical therapy?
7. What is the cost for resident and basic care? What are the costs for additional services, such as television, laundry, incontinent care, supplies, drugs, occupational or physical therapy, physician visits, and special diets?
8. Are there opportunities to visit with other residents? Are there a number of attractive common areas? Is there a reading or bridge club?
9. Is there a resident council or a resident association that meets regularly with the management?
10. Is there a central dining room?
11. Is there private or public transportation available for visitors?
12. Is there a choice of single and double rooms? Are bathing and bathroom facilities conveniently located?
13. What, if any, action will the home take if your personal financial resources are depleted and Medicaid must assume your health care costs?
14. To what extent does the management assume responsibility for the security of your personal belongings?

NOTES:

RESOURCES

There is great variety among supportive housing arrangements in communities across the country. Some communities may have a limited number of facilities; others may offer many options. To learn what is available in your community, look in the classified section of the phone book under home health care, social service organizations, nursing homes, or retirement communities. Call your local library for names, addresses, and telephone numbers. City, county, and area agencies on aging often have such information and may be in your telephone directory's list of government offices. Your senior center also may be a good source of information. Another option is to contact your state office on aging for a reference to facilities in your community. A list of the addresses and phone numbers of state offices is on pages 31 and 32.

In addition, it may be useful to get in touch with any of the following:

Religious organizations are one of the oldest providers of services to the elderly. Check with churches, synagogues, or other religious organizations in your community about housing programs that they may sponsor. Religious organizations may also serve as clearinghouses for locating other supportive housing arrangements.

The Social Service or Discharge Planning Office of a hospital is generally a good resource for individuals who reside in the geographic area served by the hospital. These offices should be able to direct you to supportive housing facilities in your area, whether or not you are or have been a patient at the hospital.

Private social service agencies, such as the Visiting Nurses Association, often provide services to individuals in a given community. They should be listed in the phone book or with a city, county, or area agency on aging.

National organizations may be able to provide assistance through their local chapters or other affiliates. Some of these include:

American Association of Homes
for the Aging
1129 20th Street, NW, Suite 400
Washington, DC 20036

American Association of Retired Persons
1909 K Street, NW
Washington, DC 20049

American Health Care Association
1200 15th Street, NW
Washington, DC 20005

Design for Aging
American Institute of Architects
1735 New York Avenue, NW
Washington, DC 20006

Gray Panthers
3635 Chestnut Street
Philadelphia, PA 19104

National Association of Home Care
205 C Street, NE
Washington, DC 20002

National Council of Senior Citizens
925 15th Street, NW
Washington, DC 20005

National Council on the Aging, Inc.
(includes National Institute of
Senior Centers)
600 Maryland Avenue, SW,
West Wing 100
Washington, DC 20024

National HomeCaring Council
235 Park Avenue South
New York, NY 10003

National League for Nursing/
American Public Health Association
10 Columbus Circle
New York, NY 10019

If you find that you want to read more about housing alternatives for older persons, the following references may be useful. Each can be found either at your local library or through the organization listed with the publication.

GENERAL

American Association of Retired Persons, **Housing Options for Older Americans**, AARP Fulfillment, PO Box 2400, Long Beach, CA 90801.

A booklet designed for older persons who are considering a change in their living arrangements. Included are options for remaining in one's home as well as for making a move.

• • •

Bierbrier, Doreen, **Living with Tenants: How to Happily Share Your House With Renters for Profit and Security**, The Housing Connection, PO Box 5536, Arlington, VA 22205, 1983 ($7.00).

A practical guide to a variety of housing arrangements, including housesharing and accessory apartments. The guide emphasizes tenant selection and cites many factors related to landlord and tenant relations. Included is a packet of forms designed to assist in the management of shared living arrangements.

• • •

Hemming, Roy, editor, **Finding the Right Place for Your Retirement**, 50 Plus Guidebooks, 850 Third Avenue, New York, NY 10022, 1983 ($3.15).

A guide to deciding where and how to live during retirement, including checklists to help with decisionmaking.

• • •

Myers, Phyllis, **Aging in Place: Strategies to Help the Elderly Stay in Revitalizing Neighborhoods**, The Conservation Foundation, 1717 Massachusetts Avenue, NW, Washington, DC 20036, 1982 ($7.50 + 2.00 shipping and handling).

This is a general sourcebook of programs to help older persons stay in their homes, particularly in neighborhoods that are undergoing change. It includes names and addresses of local, state, and national organizations and descriptions of their respective housing programs.

• • •

Stanford, Barbara, **Long Life and Happiness: Taking Charge at 65**, 3010 Santa Monica Boulevard, Suite 239, Santa Monica, CA 90404, Long Life Center, 1983 ($8.50).

A positive portrayal of the satisfying experiences that come with old age, including a discussion of living alone and living with someone else, either in your home or in a supportive living arrangement.

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Sumichrast, Michael, Schafer, Ronald G., and Sumichrast, Marika, **Planning Your Retirement Housing**, AARP Books, 400 South Edward Street, Mount Prospect, IL 60056. ($8.95 plus $1.30 for shipping and handling).

A book addressing the major issues of housing costs, designs, planning, and regulations. Based on the advice of over 1400 retirement-aged persons, the book outlines the best housing to suit any particular need.

HOME HEALTH CARE

American Association of Retired Persons, **A Handbook About Care in the Home**, American Association of Retired Persons, Fulfillment D 955, 1909 K Street, NW, Washington, DC 20049, 1982 (single copies available at no charge).

This handbook is designed to teach older persons and their families about home care, the services available, and the agencies that provide them.

• • •

Council of Better Business Bureaus and National HomeCaring Council, **All About Home Care: A Consumer's Guide**, National HomeCaring Council, 235 Park Avenue, New York, NY 10003 ($2.00).

A consumer guide that answers basic questions about home care, designed to help in the selection of home care services.

HOME ADAPTATIONS

Raschko, Bettyann Boetticher, **Housing Interiors for the Disabled and Elderly**, New York: Van Nostrand Reinhold Company, 1982 ($34.50).

This is a thorough guide to the housing design requirements of older and handicapped individuals. Included are sections on the entry, doors, living room, kitchen, dining room, bathroom, bedroom, storage, mechanical systems, and design considerations for the blind.

HOUSESHARING

Action for Boston Community Development, Inc., **Shared Living: Individual Planning Guide**, Action for Boston Community Development, Inc., 178 Tremont Street, Boston, MA 12111, May 1982 ($2.00).

A useful handbook on shared homes that addresses the steps involved in starting a shared home, including initial considerations, finding housemates, and managing the home.

• • •

Shared Housing Resource Center, **Shared Housing for Older People: A Planning Manual for Group Residences**, Shared Housing Resource Center, Inc., 6344 Greene Street, Philadelphia, PA 19144, 1983 ($9.50).

This is a planning manual for group residences that describes, in detail, sponsorship, site selection, zoning, safety and fire codes, design considerations, budget, liabilities, and recruitment of residents.

• • •

Shared Housing Resource Center, **Is Homesharing for You? A Self-Help Guide for Homeowners and Renters**, Shared Housing Resource Center, Inc., 6344 Greene Street, Philadelphia, PA 19144, 1983 ($2.75).

A guide for individuals who wish to seek a homesharing arrangement on their own. Chapters include a discussion of homesharing, what it takes to make homesharing work, a questionnaire for homeowners and homesharers, and ideas for interviewing potential homesharers.

ACCESSORY APARTMENTS

Hare, Patrick H., **Accessory Apartments: Using Surplus Space in Single Family Houses**, American Planning Association, 1313 E. 60th Street, Chicago, IL 60637, 1981 ($10.00).

This report focuses on the issues raised by adding an accessory apartment to a single family home and the relevant zoning provisions involved. Included is sample language for a zoning amendment to permit accessory apartments.

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Hodges, Samuel J. III and Goldman, Ellis G., **Allowing Accessory Apartments: Key Issues for Local Officials**, Department of Housing and Urban Development, Office of the Assistant Secretary for Policy Development and Research, HUD-PDR-747, HUD User, PO Box 280, Germantown, MD 20874, 1983 ($5.00).

A product of the Joint Venture for Affordable Housing, this HUD report examines the need for accessory apartments, identifies costs and benefits to the community and individuals, and discusses ordinances to permit accessory apartments.

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Verripa, Bert, **Second Units: An Emerging Housing Resource**, People for Open-Space, 512 Second Street, San Francisco, CA 94107, June 1983 ($15.00).

This technical report evaluates the costs and benefits of second units and considers a number of amendments to zoning regulations. It is an informative discussion of the effect of accessory apartments on the housing situation in general and neighborhoods in particular.

ECHO HOUSING

American Association of Retired Persons, **ECHO Housing Slide/Tape Presentation and Fact Sheet**, American Association of Retired Persons, Program Scheduling Office, 1909 K Street, NW, Washington, DC 20049, 1983 (sold for $27.00; no charge to borrow).

This program is designed to provide an introduction to the concept of ECHO housing and to encourage the introduction of ECHO housing in communities across the country.

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Hare, Patrick H., **ECHO Housing: Zoning Issues and Other Considerations**, American Association of Retired Persons, Fulfillment D1023 and D1190, 1909 K Street, NW, Washington, DC 20049, 1983 (free).

Presented in this booklet is a review of technical zoning issues raised by ECHO units. It is designed to be used primarily by families and public officials who are interested in ECHO housing's potential for responding to the diverse needs of older Americans. Included with the booklet is a **Model Ordinance for ECHO Housing**.

CONGREGATE HOUSING

Carlin, Vivian F. and Mansberg, Ruth, **If I Live To Be 100...Congregate Housing for Later Years**, West Nyack, NY: Parker Publishing Company, Inc., 1984 ($8.95).

Focusing on one middle-income congregate residence, this book describes the environment, level of activity, and independence of residents in a congregate housing facility. In addition, it discusses other communal housing choices and the importance of planning ahead.

CONTINUING CARE RETIREMENT COMMUNITIES

American Association of Homes for the Aging, **The Continuing Care Retirement Community: A Guidebook for Consumers**, 1050 17th Street, NW, Washington, DC 20036 ($2.00).

A booklet that examines the variety of contractual arrangements offered by continuing care retirement communities (CCRCs). It is designed to assist persons who are about to enter a CCRC (and their families) and includes a checklist of facts the consumer should know before signing a continuing care contract.

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National Consumers League, **A Consumer Guide to Life-Care Communities**, 600 Maryland Avenue, SW, Suite 202, West Wing, Washington, DC 20024 ($3.00 for nonmembers).

A guide to both the benefits and disadvantages of life-care communities, designed to assist potential residents in making informed decisions. Cautions for examining the financial health of various life-care communities are discussed and visits to two life-care communities are described. The guide includes a consumer checklist.

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Raper, Ann Trueblood, editor for American Association of Homes for the Aging, **National Continuing Care Directory**, AARP Books, co-published by AARP and Scott, Foresman and Company, Dept HOOA, 400 S. Edward Street, Mt. Prospect, IL 60056, 1984 ($13.95, also available in bookstores).

A consumer directory that includes descriptive information about approximately 400 continuing care communities nationwide. It lists fees, types of living arrangements, special features, and general and health-related services available in each community.

NURSING HOMES

Council of Better Business Bureaus, Inc., **Tips on Choosing a Long-Term Care Facility**, Pub. No. 24-176, 1515 Wilson Boulevard, Arlington, VA 22209, 1982 ($0.25 in self-addressed stamped envelope).

A very readable brochure that provides helpful ideas for finding the right facility. Physical considerations, services, attitudes, atmosphere, charges, and admissions arrangements are discussed.

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Burger, Sarah Greene and D'Erasmo, Martha, **Living in a Nursing Home: A Complete Guide for Residents, Their Families and Friends**, The Continuum, 370 Lexington Avenue, New York, NY 10017 ($8.95).

This guide, written by two registered nurses, covers a range of nursing home-related topics, including how to evaluate homes, legal rights of residents, and common mistakes made by well-meaning families and friends. The emphasis is on family decisionmaking.

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AMERICAN ASSOCIATION OF RETIRED PERSONS
IN COOPERATION WITH THE FEDERAL TRADE COMMISSION, 1985

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